

Upcoming Events

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for an at-a-glance view of our upcoming events for the next 3 months

From Needs Assessment to Improvement & Change

The landscape of health professions education has been bursting with change over the last 18-months. We've seen evolution in the complex roles and needs of our faculty during this time and in response we have attempted to pivot our initiatives accordingly. As the demands on our faculty continue to rise, we recognize that it is more important than ever to provide timely, meaningful professional development opportunities that align with the needs and goals of our faculty. Professional development is critical for providing faculty with the necessary knowledge and skills for adapting to current and future changes. Creating a variety of professional development opportunities for busy faculty is a great challenge, but the Office of Continuing Professional Development (OCPD) continues to work diligently to meet the diverse and complex needs of those we serve.

Semi-annually, OCPD distributes a needs assessment to take stock of our current impact and identify areas of need throughout our community (many thanks to those who completed our lengthy survey this Spring!). This needs assessment helps us target the specific needs and areas of improvement we can address over the coming months. In review of the responses, we found many were excited by our shift to online offerings as it offered increased flexibility and accessibility. This positive impact is clear as we look at our increasing participation numbers for Zoom sessions. However, we also saw that many miss the engagement made possible by the in-person setting. Many comments demonstrated feelings of loss related to the connection, interactivity, and networking that were prevalent at live sessions. We hope to see a shift back to a hybrid approach for sessions in the coming year (with both online and in-person participation options) to regain the feelings of community that our activities usually offer. In the meantime, we have developed the following goals for the coming year in response to the themes we saw arise from the needs assessment results:

- Continue offering virtual access to live and archived recorded sessions for increased flexibility and accessibility.
- Create opportunities to foster faculty engagement within our sessions.
- Enhance the ease of identifying relevant and practical opportunities for faculty.
- Improve organization and access to existing resources and content.
- Consciously integrate additional elements of Health Systems Science, and Diversity, Equity, and Inclusion
- And continue to evaluate for continuous improvement!

Faculty feedback on the needs assessment regarding session topics, format, and communication of information has been essential as we shape our professional development planning for the coming year. Our website is a wealth of information and holds our [3-month at-a-glance calendar](#) that will help to provide a snapshot of the offerings we have coming. We are currently in the process of re-designing our websites ([TEACH](#) and [OCPD](#)) to enhance navigation and the user-experience. Through our planned programming, online session calendar, consultation services, monthly newsletters, and on-demand training opportunities we hope to provide faculty with the knowledge and skills necessary to best teach our learners.

We plan to continue to provide meaningful and accessible faculty development in a practical manner that will best meet faculty needs. Through your continued feedback and review of your evolving needs, we will continue to improve to best prepare faculty in their varied roles. Please always feel free to contact us with feedback. We hope to see you (virtually) at one of our upcoming sessions!

- Mariah Rudd, MEd, Director of Office of Continuing Professional Development

"Somewhere along the way, we must learn that there is nothing greater than to do something for others."

Martin Luther King Jr.

Dean's Corner

Last year, the Dean's Corner focused on the principles of Health Systems Science. The focus for the remainder of this year will be Diversity, Equity, and Inclusion and will be authored by Azziza 'Kemi' Bankole, MBBS, Carilion Clinic psychiatrist and VTCSOM associate professor of psychiatry and behavioral medicine and chief diversity officer. Dr. Bankole devotes this month to the importance of names.

Say My Name

It often appears that the act of naming, be it of people, things, or experiences, is an inherent part of being human. Our names are an integral part of who we are, an extension of ourselves. Many cultures imbue names with significance and meaning. In mine, names are very important and will often describe a particular part of your identity, culture, or religion.

In science we label everything, and behind every label is a meaning that is generally agreed upon. We do this in an effort to promote clarity, and it is why definitions matter so much to us. As clinicians we understand the importance of accurately naming things to the best of our knowledge and abilities. In contrast, I have noticed how often we overlook the importance of accurately naming things elsewhere.

Names are personal and wrapped in meaning. In our efforts to build an inclusive environment for all, it is our duty to make deliberate and determined efforts to pronounce the names of those we interact with correctly. If our names are an inherent part of our identity and extension of ourselves, then it can be a painful experience when those in our community do not put any effort into pronouncing it correctly or even worse, ask if they can call you something else because that would be easier for them. Taking time to get someone's name right is a sign of respect and care that we should all have for ourselves, our students, our colleagues and coworkers, and our patients.

The names we use are affected by many factors including geography, age, and occupation. Since moving to Southwest Virginia, I have learned that certain words are received or understood differently when compared to when I was in training in the northeast. For example, asking my older adult patients if they were "anxious" often elicited some confusion but I would observe immediate understanding if I asked if they were "nervous." This form of cultural competency is often overlooked.

It is important to keep in mind that names and designations can change. In medicine we see this all the time with updated names for the diseases and disorders that we treat. In the past half millennia, posttraumatic stress disorder has been known as "nostalgia," "soldier's heart," "irritable heart," "Da Costa's syndrome," and "shell shock" to name a few. The same holds true for people.

As humans we are fallible, so be prepared to make mistakes but also to learn from them. The fear of making mistakes should not prevent us from doing what is right. As a community we need to provide people the space to make mistakes as they try to get things right. That is what growth looks like.

- Kemi Bankole, MBBS, Psychiatry, Carilion Clinic; Associate Professor of Psychiatry and Behavioral Medicine and Chief Diversity Officer, Virginia Tech Carilion School of Medicine

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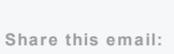
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